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U.S.P.T.O.

PTO/SB/05 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 555255012698

First Inventor Adrian Buckley

Title Apparatus, and Associated

Express Mail Label No. EV243777631US

U.S.P.T.O.
031431
10772024

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification [Total Pages 38]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets 4]

5. Oath or Declaration [Total Sheets _____]

- a. Newly executed (original or copy)
- b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. Application Data Sheet. See 37 CFR 1.76

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)

- a. Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. Paper
- c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))

10. 37 CFR 3.73(b) Statement Power of Attorney
(when there is an assignee)

11. English Translation Document (if applicable)

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment

14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.

17. Other: Claims priority on PCT/CA03/00161..... filed February 6, 2003.....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No.

Prior application information:

Examiner _____

Art Unit: _____

For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.

The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

 Customer Number: _____ OR Correspondence address below

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Fax	(216)579-0212		

Name (Print/Type)	David B. Cochran	Registration No. (Attorney/Agent)	39,142
Signature	<i>David B. Cochran</i>	Date	02/04/2004

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FEE TRANSMITTAL for FY 2004		Complete if Known	
		Application Number	Not Yet Assigned
		Filing Date	February 4, 2004
		First Named Inventor	Adrian Buckley
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Not Yet Assigned
TOTAL AMOUNT OF PAYMENT (\$ 770.00)		Art Unit	Not Yet Assigned
		Attorney Docket No.	555255012698

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																															
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 501432 (555255012698) Deposit Account Name Jones Day		3. 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SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	David B. Cochran	Registration No. (Attorney/Agent)	39,142
Signature			Telephone 216-586-3939
			Date 2/4/2004

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